

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-009-15571-0000

LEASE NAME Steckel

WELL NUMBER A-5

3630 Ft. from S Section Line

3630 Ft. from E Section Line

SEC. 22 TWP. 20S RGE. 12W (E) or (W)

COUNTY Barton

Date Well Completed 1957

Plugging Commenced 4-10-00

Plugging Completed 4-12-00

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Te-Pe Oil & Gas

ADDRESS P.O. Box 522 Canton, Kansas 67428

PHONE (316) 628-4428 OPERATORS LICENSE NO. 5920

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on _____ (date)

by Jay Pfeifer (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3437'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8"	230'	None
				5-1/2"	3437'	2010'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from _____ feet to _____ feet each s

Plugged off bottom with sand to 3220' and 5 sks. cement, shot pipe @2010', pulled up to 1450', pumped 100 sks. cement and 300# hulls, pulled up to 650' and circulated cement pulled rest of pipe and topped off. 60/40 pos, 10% gel.

Plugging Complete

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Te-Pe Oil & Gas

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed t the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

RECEIVED

STATE CORPORATION COMMISSION

APR 17 2000

SUBSCRIBED AND SWORN TO before me this 14th day of April, 2000

CONSERVATION DIVISION
Wichita, Kansas My Commission Expires: _____

IRENE HERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 2001

Form CP
Revised 05-